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SUBJ/PUBLIC AFFAIRS-NAVAL SERVICE MEDICAL NEWS (NSMN) (94-33)//
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RMKS/1. THIS SERVICE IS FOR GENERAL DISTRIBUTION OF INFORMATION AND NEWS OF INTEREST TO NAVY AND MARINE CORPS MEMBERS, CIVILIAN EMPLOYEES, FAMILY MEMBERS AND RETIRED BENEFICIARIES OF NAVY MEDICINE. MAXIMUM AND TIMELY REDISTRIBUTION OR FURTHER REPRODUCTION AND USE BY ACTION ADDRESSEES IS ENCOURAGED. THIS MESSAGE HAS BEEN COORDINATED WITH THE COMMANDANT OF THE MARINE CORPS (CMC). THE COMMANDANT HAS AUTHORIZED TRANSMISSION TO MARINE CORPS ACTIVITIES.

2. HEADLINES AND GENERAL INTEREST STORIES THIS WEEK:

(940273)-U.S. Hospital Zagreb Changes Hands
(940274)-Corpsman Donates Life-saving Marrow
(940275)-Brother Saves Brother With Bone Marrow
(940276)-Marrow Donor Sorenson Beats Odds
(940277)-DOD Donors Honored During Congressional Briefing
(940278)-Bone Marrow Donor Registry Statistics
(940279)-Navy Medical Department People in Special Operations

HEADLINE: U.S. Hospital Zagreb Changes Hands

NENS - UNPROFOR Zagreb, Croatia (NSMN) -- In a 29 August ceremony, Fleet Hospital 5 staff assumed the duties at the U.S. Hospital serving the United Nations Protection Force in Zagreb.

The change of command ended a six-month deployment for Fleet Hospital 6 staff, the first U.S. Navy medical contingent to deploy to Croatia under the auspices of the UNPROFOR.

CAPT Gregg Parker, MC, is in command of the Fleet Hospital 5 staff, who reported to Zagreb from various East Coast commands.

Fleet Hospital 6 personnel, commanded by CAPT James A. Johnson, MC, amassed an impressive record during their six-month tour, performing more than 225 operations and treating more than 300 inpatient and 7,000 outpatient cases.

Some of Fleet Hospital 6's many educational endeavors included the training of other health care personnel in airway management, cardiopulmonary physiology, anesthetic techniques and postoperative patient management. They also developed a unique and efficient inventory system for anesthesiology equipment and consumables, ensuring needed material was always immediately available. And supply department personnel successfully explored all available avenues for procuring needed supplies and equipment unique to the hospital's mission.

Communication personnel were also key to the success of the mission by significantly upgrading the telemedicine communications system linking the U.S. Hospital in Zagreb with Naval Medical Center San Diego, National Naval Medical Center Bethesda, MD, BUMED and the Naval Medical Logistics Command in Fort Detrick, MD. The system allowed the real-time exchange of audio and video imaging, including transmission of lab slides and X-ray images for interpretation.

Story reprinted from NavEur News Service 94-33

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EDITORS NOTE: Following are several articles about bone marrow donation, provided for your use in conjunction with National Marrow Donor Awareness Week, 11-17 September. If you use the Navy Times story, you MUST credit Navy Times.

HEADLINE: Corpsman Donates Life-saving Marrow

NAVY TIMES, Washington (NSMN) -- A hospital corpsman second class gave a 7-year-old boy a second chance at life at Georgetown University Hospital when he gave away part of himself -- his bone marrow.

"If I couldn't help my kids, it's something I'd want somebody to do," said HM2 Jeffrey Moore, father of two whose wife is due with their third in October.

Moore participated in a bone marrow registration drive at Naval Hospital Groton, CT, in 1992 after his lab officer, the coordinator of the event, encouraged him. A month ago he received a call telling him he had been matched with a boy suffering from aplastic dysplasia.

"When they told me a little boy, it gave me chills, because my wife's going to have a boy," Moore said. He was told that it is rare to find a match outside a recipient's family.

Moore was flown to Georgetown Hospital 24 August, where the procedure was performed the next day. The whole procedure cost him nothing but his time and bone marrow.

For now, Moore knows little about the little boy who will receive his marrow, although he will be kept informed of the child's condition. After a year, if both parties desire, they will be able to meet.

"Maybe they'll find the cure for his disease. It would be neat to know I had something to do with that," he said.

The Donor Services Center sets up donor registration drives at military bases across the country. All donor testing and procedures are free.

To set a registration drive or to find out how to get on the registry, call 1 800 MARROW3.

Story reprinted from Navy Times, 5 September 1994

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HEADLINE: Brother Saves Brother With Bone Marrow

NMC Portsmouth, VA (NSMN) -- When MMC Jay M. VanDuzer transferred to USS Puget Sound (AD 38) in January 1992, he had no idea that the radiation health physical he received upon reporting would change his life. VanDuzer was given a blood test

that showed his white blood cell count to be well over 80,000. The medical officers on board Puget Sound thought it looked like leukemia. VanDuzer was immediately sent to Naval Medical Center Portsmouth's emergency medical department for further tests. The blood work that the ER performed confirmed the diagnosis.

VanDuzer spent the next 24 hours getting physicals, blood work and preparing himself for the long road to recovery. His physician, Dr. George Savides, offered some hope, recommending a bone marrow transplant. To prepare his body for the transplant, VanDuzer was immediately started on oral chemotherapy.

Before a bone marrow transplant can be performed, a donor must be matched to the recipient's bone marrow. After VanDuzer's bone marrow was tested, the Bone Marrow Donor Program in Bethesda, MD, sent bone marrow testing kits to the chief's immediate family. Since the chief was one of seven children, he had a fairly good chance of finding a match, which he did, in two brothers and one sister.

VanDuzer decided to receive the bone marrow from his younger brother, 1LT Nathan VanDuzer, stationed at Fort Eustis, VA. The two went to Wilford Hall Air Force Medical Center at Lackland Air Force Base, San Antonio, where the chief received the bone marrow transplant after undergoing massive chemotherapy to kill off the cancer.

In October that same year, Chief VanDuzer was sent to Naval Medical Center Portsmouth on limited duty to recover. He returned to full duty in March 1994. So far, there have been no signs that his leukemia will relapse. Chief VanDuzer owes his life to the Bone Marrow Donor Program.

"I was very lucky to have found a donor. Many people never find a donor. That's why it's very important that people get tested. One simple blood test could save someone's life," said the chief.

He brother shares the sentiment. "If you donate a kidney or another vital organ, you can give only one to save someone's life, where donating bone marrow can be done every couple of months," he said. "If my brother should ever need bone marrow again, I would donate tomorrow. It's a relatively painless procedure with no lasting side effects, but the lasting impact is that you saved someone's life.

Every year, an estimated 16,000 Americans are stricken with fatal blood diseases such as leukemia. For many, the only hope for survival is a marrow transplant. Nearly 70 percent cannot find a suitable match within their families. This is where the national registry comes in. As the pool of potential marrow donors increases, so do the odds of a life-saving match. You could save a life.

A simple blood test is used to determine your human leukocyte antigen, or HLA, tissue type. Your name is then placed in the national registry. When someone needs bone marrow, they can go to the registry and find out if they have a match. The donor program is completely voluntary. The DOD Bone Marrow Donor Program is open to all active duty, DOD civilians and active duty dependents between the ages of 18 and 55.

The DOD goal is to put at least 25,000 personnel in the

national registry every year. Your command will issue you no-cost TAD orders if you should ever be called to be a donor. Recipients pay all expenses for donors and their spouses.

Story by HM3 Christina Weinreber

Reprinted from The Flagship, 30 June 1994

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HEADLINE: Marrow Donor Sorenson Beats Odds

NMC San Diego (NSMN) -- When people tell Kris Sorenson he should feel like a hero, he shuns the praise.

He says he felt more like he was pregnant.

"I watched what I ate, I drove very carefully, I didn't walk on the edge of life by taking any chances," he declares now.

"Because everything I did, I was doing for two people."

Sorenson learned early last month that -- in a 1 in 10,000 shot -- he may be the last hope for a victim of lymphatic cancer who is battling the disease with marrow from Sorenson's bones.

"But I never dreamed I'd be a match for anyone," Sorenson said after returning from the C.W. Bill Young Bone Marrow Donor Center in Bethesda, MD.

That's understandable. When he first signed up for the marrow donor program two years ago, he was informed that the real chance of being a match for someone was slim, about 1 in 10,000 according to Jennifer Caliandro of the National Marrow Donor Program in Minneapolis.

"As of May, we had a total volunteer force of more than 1.2 million," Caliandro said.

"Of those, there were 2,579 unrelated marrow transplants (marrow donated by an individual other than the family member of a cancer victim."

But Sorenson cared little for the numbers and plunged ahead in the program. When he was called by the marrow donor center and advised there was an initial match, he was ecstatic.

"We called him and he was very excited," said Madonna Pelkey, supervisor of the Department of Defense Donor Center. "But we still had to determine he was still interested in going on."

Pelkey said that's just step one. Given the donor's go-ahead, more blood samples are requested. With favorable results, the donor is flown to the donor center for more tests, a DNA match and, finally, the procedure. Sorenson said there was nothing to worry about.

"I was a little apprehensive," he admits, "but it really wasn't bad."

Pelkey said the donor is given a general anesthetic. Then a needle is inserted into the iliac crest (the outer rolling edge of the upper hip bone) and is then used to extract bone marrow.

"The biggest thing you need to be prepared for is fatigue," Sorenson said. "There is some discomfort in the buttocks, but it looks worse than it feels."

Sorenson doesn't know much about the cancer victim.

"There's a tremendous shroud of secrecy," he explains, "but that's to protect the victim as well as the donor. I know I'm providing marrow for a woman 35 years old, but that's pretty much

it."

Pelkey says that only through mutually agreed upon consent will they be revealed to each other. Either way, Sorenson is happy he was able to donate his marrow and thanked his supervisors and managers for supporting him.

"I think it is a terrific privilege to come forward and help your fellow man, and it's certainly a great honor to give something of yourself that could change someone else's life."

And dramatically so. If successful, the woman who receives Sorenson's marrow must first be completely relieved of her own marrow, every last drop of it, and then be infused with Sorenson's. From there, her body must recover and replicate the new marrow and all its disease fighting ability, until she is declared well. And, hopefully, the cancer will have been eradicated.

If she survives, and the odds suggest she will, she will have acquired a new blood type -- Sorenson's -- and a new lease on life.

"I can tell everyone considering doing this that it's well worth it," said Sorenson. "Any fears they have are easily outweighed by the feeling of worth."

Story by H. Sam Samuelson

Reprinted from The Dry Dock, Naval Medical Center, 24 June 1994

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HEADLINE: DOD Donors Honored During Congressional Briefing

NMDP Minneapolis (NSMN) -- In April, the National Marrow Donor Program and its participating Department of Defense marrow donor center recognized the DOD volunteers who have been bone marrow donors.

The recognition took place at a briefing of select members of Congress on Capitol Hill, 13 April 1994.

The DOD volunteers donated a small amount of their marrow for patients who otherwise would have died of their leukemia or other fatal blood diseases.

"We are here to celebrate the life and joy that has been given back to patients and their families," said ADM E.R. Zumwalt Jr., USN (Ret.), who is chairman of the NMDP Board of Directors.

"These kids are the reason we're here doing what we're doing," said CAPT Robert Hartzman, MC, USN, medical director for the DOD marrow donor center. Hartzman was referring to the recipients who have been saved through marrow transplants from unrelated donors from the NMDP.

Since becoming an NMDP-participating center in 1990, the DOD donor center has educated and recruited more than 45,000 volunteers who are willing to become marrow donors if they match a patient in need. These volunteers include active military personnel, their dependents and civilian DOD employees. Of the 45,000 volunteers, more than 100 have gone on to donate their marrow.

DOD marrow donors at the briefing were: HTCS William Atkinson, Mr. Jim Balick, SSG Neil Hadden, CDR Alexander Lopes and EWCM(SW) Mike Nahava (Ret.).

"Our job will not be done until every child, man and woman

finds a matched donor to cure them of their disease. We will continue our work until that day arrives," said Congressman C.W. Bill Young of Florida, who has been a strong supporter of the national and DOD programs.

Through Congressional appropriations, funding has been made possible to help defray costs associated with matching patients to donors. Such costs include blood tests to register volunteers as potential donors, research into DNA technology for identifying donors, computer software to expedite donor searches and public education initiatives.

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HEADLINE: Bone Marrow Donor Registry Statistics

NMDP Minneapolis (NSMN) -- The number of volunteer donors listed on the National Marrow Donor Program (NMDP) Registry has increased to 1,311,867 as of 31 July 1994. The total number of transplants facilitated by the NMDP increased to 2,612 as of 31 July 1994.

The number of minority volunteer donors on the Registry as of 31 July 1994 is as follows:

- African Americans: 81,025 volunteers
- Asian/Pacific Islanders: 58,050 volunteers
- Hispanics: 80,689 volunteers
- Native Americans: 15,214 volunteers.

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HEADLINE: Navy Medical Department People in Special Operations

BUMED Washington (NSMN) -- Wherever the Navy or Marine Corps goes, so does the Navy Medical Department. Thirty percent of our personnel are normally assigned with deployable fleet and fleet marine forces units. Additional medical support is provided for operations such as Provide Promise. These men and women are on duty around the globe -- from fighting fires in Washington state to fighting famine and disease in eastern Africa. Here is the latest update on where are medical people are on assignment.

Medical forces currently on operational assignment are:

Operation Sea Signal

Total medical/dental personnel: 261 (includes 104 BUMED augmentees)

The Navy Medical Department is still in full support of Operation Sea Signal, even after the departure of the hospital ship USNS Comfort (T-AH 20), which is currently preparing to redeploy. Thirteen physicians, five nurses, two Medical Service Corps officers and 84 hospital corpsman are still deployed at the Naval Hospital and Naval Station located on Guantanamo Bay in addition to providing medical support to many afloat platforms. They provide medical treatment to more than 28,000 migrants.

Operation Southern Watch

Total medical/dental personnel: 172 (includes six BUMED augmentees)

USS Tripoli (LPH 10) ARG: The Amphibious Ready Group (ARG) has 38 ward beds, five operating rooms, two intensive care beds, seven quiet room beds, 400 overflow beds and has a medical/dental staff of 126.

In Country: Attached with the Administrative Support Unit Bahrain are four physicians, one dentist, three nurses, five MSC officers, 28 corpsmen and three dental technicians. BUMED also provides one corpsman to augment the COMUSNAVCENT staff, which is located adjacent to ASU Bahrain.

Operation Provide Promise

Total medical/dental personnel: 237 (includes 181 BUMED augmentees)

LCDR Gail Regan, MSC, from MED 24, is located at Camp Pleso, Zagreb, Croatia, and is acting as the Force Hygiene Officer for the United Nations Protection Force located in country.

A total of 280 personnel assigned to Fleet Hospital 5, including 197 medical people, staff the U.N. Hospital located at Camp Pleso. Medical personnel were taken from Navy Medical commands located throughout the Healthcare Support Office Norfolk region.

Operation Joint Task Force Full Accounting

Navy physicians and independent duty corpsmen are supporting this operation by volunteering to serve tours ranging from just under two weeks to two months. Naval Medical Clinic Pearl Harbor is providing a Physician Assistant to augment the mission currently in country. Eight of the nine missions to Southeast Asia identified for FY94 have been completed.

Exercise Support

Individuals and components of mobile medical augmentation readiness teams (MMARTs) support various exercises/operations as required, bolstering the "organic" medical assets of the units involved.

Surgical Team 6: Fifteen personnel -- two physicians, one MSC, three nurses and nine corpsmen from Naval Hospital Charleston, SC, are providing MMART surgical team coverage for an ongoing operation.

Fleet Surgical Teams are also deployed to provide additional medical support where needed, as directed by the CINCs.

Miscellaneous OCONUS and Fleet Support

Providing TAD (temporary additional duty) support to 11 fleet platforms and three OCONUS facilities are 19 Navy Medical Department personnel: Seven physicians, three nurses, one MSC, seven hospital corpsmen and one dental technician.

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3. Two-month calendar of events:

SEPTEMBER

National Sickle Cell Month (213/736-5211)

Women in Medicine Month (312/464-4392)

Baby Safety Awareness Month

Children's Eye Health and Safety Month (1-800-331-2020)

Leukemia Society Month (1-800-955-4LSA)

National Cholesterol Education Month (301/251-1222)

4-5 September: Muscular Dystrophy Association Telethon

5 September: Labor Day

5-7 September: Rosh Hashanah (begins/ends at sundown)

6 September: Vote! Florida and Nevada Primaries

8 September: E-4 Advancement Exam

10 September: Vote! Delaware Primary
11 September: Grandparents Day
11-17 September: National Marrow Donor Awareness Week
11-17 September: National Health Care Environmental
(312/280-3365) Services Week
11-17 September: Hospital Bed Check Week (202/333-0700)
12 September: Reserve O-3/O-4 Staff Corps Boards Convene
13 September: E-5 Advancement Exam
13 September: Vote! Arizona, Connecticut, District of Columbia, Maryland, Minnesota, New Hampshire, New York, Rhode Island, Vermont, Virgin Islands and Wisconsin Primaries
14 September: Ombudsman Appreciation Day
14-15 September: Yom Kippur (Day of Atonement, begins at sundown)
15 September: E-6 Advancement Exam
15 September - 15 October: Hispanic Heritage Month
16 September: POW/MIA Recognition Day
17 September: Vote! Hawaii Primary
17 September: Citizenship Day
17 September: U.S. Constitution Day
17-23 September: Constitution Week
18-24 September: Prostate Cancer Awareness Week
18-24 September: National Rehabilitation Week (717/348-1497
or 1498)
20 September: Vote! Massachusetts and Washington Primaries
23 September, 0219 ET: Fall Equinox -- First Day of Autumn
25 September - 1 October: National Allied Health Week
(202/857-1150)
26 September: Medical Department CO/XO Screening Board
Convenes
26 September: MSC DUINS Board Convenes
30 September: E-7/E-8 Eval Due
30 September: Reserve O-4/O-5 FitReps Due

OCTOBER

Child Health Month (708/981-7871)
Family Health Month (1 800 274-2237)
National Breast Cancer Awareness Month
Disability Employment Awareness Month
Lupus Awareness Month (1 800 558-0121 or 301/670-9292)
National Dental Hygiene Month
National Family Sexuality Education Month (212/541-7800)
National Liver Awareness Month (1 800 223-0179 or 201/256-
2550)
National Physical Therapy Month (703/706-3218)
Consumer Information Month
Talk About Prescriptions Month
Auto Battery Safety Month (1 800 331-2020)
1 October: Vote! Louisiana Primary
1-2 October: American Heart Walk (1 800 AHA-USA1)
2 October: Child Health Day
2-8 October: National Health Care Food Service Week
(312/280-3048)
2-8 October: National Materials Management Week (312/280-
6156)

2-8 October: National Mental Illness Awareness Week
(202/682-6220)

2-8 October: National Respiratory Care Week (214/243-2272)

3 October: World Habitat Day

3-9 October: Nuclear Medicine Week (212/889-0717)

4-10 October: National Mental Illness Awareness Week

6 October: National Physician Assistants Day

9-15 October: National Osteopathic Medicine Week (1 800 621-1773, ext. 5854, or 312/280-5854)

9-15 October: Fire Prevention Week (617/984-7270)

10 October 1845: U.S. Naval Academy, Annapolis, opened

10 October: Columbus Day Observed

10-16 October: American Heart Association's Heartfest (1 800 AHA-USA1)

11-15 October: National School Lunch Week (703/739-3900)

12 October: Disaster Awareness Day

12 October: Columbus Day

13 October 1775: Second Continental Congress passed legislation authorizing acquisition of ships and establishment of a Navy

16 October: World Food Day (202/653-2404)

16 October 1845: Ether used in operation

16-22 October: National Character Counts Week

16-22 October: National Infection Control Week (708/949-6052)

16-22 October: National Veterinary Technician Week (317/742-2216)

17 October 1989: San Francisco Bay earthquake, 7.1 on Richter Scale, killed 67 people and caused \$10 billion in damage

17-21 October: National Medical Assistants' Week (312/899-1500)

17-22 October: National Patient Accountant Management Week (202/857-1179)

19 October: National Medical Assistants' Day

20 October 1944: U.S. troops land on Leyte, Philippines, fulfilling Gen. Douglas MacArthur's promise, "I shall return"

22 October 1918: "Flu" killed 400,000 Americans

23-29 October: National Adult Immunization Awareness Week (301/656-0003)

23-29 October: National Healthcare Quality Week (708/966-9392)

23-29 October: National Pharmacy Week (202/429-7558)

24 October: United Nations Day (charter ratified, 1945)

24-30 October: National Pastoral Care Week (314/965-9917, ext. 1395)

30 October: Daylight-saving time ends -- turn clocks back one hour

31 October: Halloween

31 October: National UNICEF Day: Trick-or-Treat for UNICEF (1 800 FOR-KIDS or 212/686-5522)

31 October - 6 November: National Diabetes Education Week (1 800 338-DMED)

31 October: O-3, O-4 FitReps Due

4. ADDRESSEES ARE ENCOURAGED TO SUBMIT INFORMATION AND NEWS ITEMS OF MEDICAL DEPARTMENT OR BENEFICIARY INTEREST (IN STORY FORMAT) BY TELEPHONE, FAX OR E-MAIL TO BUMED, ATTN: EDITOR, NAVAL SERVICE MEDICAL NEWS (MED 00P2). TELEPHONE (202) 653-0793; DSN 294-0793. FAX (202) 653-0086; DSN 294-0086. E-MAIL NMC0ENL@BUMED10.MED.NAVY.MIL//

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